24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	C C00448696
	J 555775555
Check if X 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Senate Conservatives Fund	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	483.45
Alexandria VA 22313-0388	Transaction ID : E72A066C1A06B4119B12 Date of Disbursement or Obligation
Purpose of Expenditure IE-Ernst-Online Processing Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Joni K Ernst Oppose	President State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary General ✓ Other (specify) ► General 2014
Full Name of Payee	Date of Public Distribution/Dissemination
Townhall Media	10 23 2014
Mailing Address 402 BNA Drive Ste. 400	Amount 23 2014
City State Zip Code	20000.00
Nashville TN 37217-2509	Transaction ID : EF216FE17D1A34E28AA6 Date of Disbursement or Obligation
Purpose of Expenditure IE-Ernst-Email List Rental Category/ Type	10 23 / Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:
Joni K Ernst Oppose	President State: IA
Calendar Year-To-Date Per Election for Office Sought Disb 286311.48	ursement For: Primary General ✓ Other (specify) ► General 2014
	Suiter (opcomy) ?
(a) SUBTOTAL of Itemized Independent Expenditures	20483.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	20483.45
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Bato	0 23 2014
Signature	